

CLAIMS ONLY

Application Number

Filing Date

101964,170

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1	1					
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
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23						
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25						
26						
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28						
29	1					
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32						
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36						
37						
38						
39						
40						
41						
42						
43						
44						
45						
46						
47						
48						
49						
50						
Total						
Indep						
Total						
Depend						
Total						
Claims						

*	*	*	*	*
	Indep	Depend	Indep	Depend
51				
52				
53				
54				
55				
56				
57				
58				
59				
60				
61				
62				
63				
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65				
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87				
88				
89				
90				
91				
92				
93				
94				
95				
96				
97				
98				
99				
100				
Total				
Indep	2			
Total				
Depend	53			
Total				
Claims	55			